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PATENT APPLICATION

7382-000001 Attorney Docket No. First Inventor Heravi et al

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TRANSMITTAL						Fitle WINCH CONTROLLER				
(Only for n	ew nonprovisiona	applications under 3	37 C.F.R. 1.53(b))	Ехрі	ress Mail L	abel No.	EL 623481899 U	s	13 U.S.	
See MPEP o		ICATION ELEI			ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
2.	Submit an original and Applicant claims See 37 CFR 1.2 Specification oreferred arranged Descriptive title of Cross References Statement Regar Reference to sequence or a computer probackground of the Brief Summary of Brief Description Detailed Descript Claim(s)	(Totament set forth below) If the Invention In the Invention In the Invention In the Invention In the Invention If the Invention In the Invent	cessing) al Pages Specifications Filed in English ax	glish	8. Nucle (if ap) a.	computer footide and/ olicable, and/ computer cification of CD-ROM paper Statement ACCOM Assignment 37 C.F.R	Program (Appen or Amino Acid S Il necessary) Readable Form Sequence Listin Il or CD-R (2 cop s verifying identi PANYING APPI	tequence Submission (CRF) g on: pies); or ity of above copies LICATIONS PARTS er sheet & document(s)) thent Power of	176	
4. Drawing(s) (35 U.S.C.113) [Total Sheets 7] 5. Oath or Declaration [Total Pages 3] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76						 11. ☐ English Translation Document (if applicable) 12. ☑ Information Disclosure ☑ Copies of IDS Statement (IDS)/PTO-1449 Citations 13. ☐ Preliminary Amendment 14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. ☐ Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. ☐ Other: 				
or in an App Conti Prior app For CONTIN under Box 5	olication Data Shi inuation olication information IUATION or DIVIS 5b, Is considered	neet under 37 CFR 1 Divisional on: Examiner SIONAL APPS only:	.76: Continuation-in- Continuation-in- The entire disclosi sure of the accomp	part (C ure of t panying n inady	ihe prior a g or division vertently o	of p Gro pplication, onal applic mitted from	prior application No pup / Art Unit: from which an oa ation and is here!	ath or declaration is suppl	lied	
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Name	Harness, Dick	key & Pierce, P.L.C	> .							
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City	Bloomfield Hi	lls	State	N	/II		Zip Code	48303		
Country	United States	of America	Telephone	2	248-641-1600 Fax 248-641-0270					
Name (Pr		Ryan W. Massey			egistration	No. (Atto	mey/Agent) Date	38,543	42	

PTO/SB/17 (01-03)
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FEE TO ANOMITTAL			
FEE TRANSMITTAL	Application Number		
for FY 2003	Filing Date		
	First Named Inventor	Heravi et al	
Patent fees are subject to annual revision.	Examiner Name		
☐ Applicant claims small entity status. Se 37 CFR 1.27	Group / Art Unit		
TOTAL AMOUNT OF PAYMENT (\$) 1042	Attorney Docket No.	7382-000001	

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METHOD OF PAYMENT (check all that apply)						FEE CALCULATION (continued)							
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Number	Account 08-0750							1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
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1. BASIC	EII II	NG FEE						1253	930	2253	465	Extension for reply within third month	
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1002 530		03 260		ant filing fee	 -		-	1403	280	2403	140	Request for oral hearing	
1004 750	20	004 375	Re	eissue filing fe	_			1451	1,510	1451	1,510	Petition to Institute a public use proceeding	
1005 160	20	005 80	Pr	rovisional filling) fee		J	1452	110	2452	55	Petition to revive – unavoidable	
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2. EXTRA CL	AIM	FEES						1502	470	2502	235	Design issue fee	
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Claims	6	-3 **	= [3	3X	84 :	= 252	_	1806	180	1806	180	Submission of Information Disclosure Stmt	
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1202 18		2202	9	Claims in ex	cess of 20			1810	750	2810	375	For each additional invention to be	
1201 84		2201	42	Independen	t claims in e	excess of 3						examined (37 CFR § 1.129(b))	
1203 28	0	2203	140	Multiple der	oendent clair	m, if not pai	d	1801	750	2801	375	Request for Continued Examination (RCE)	
1204 84		2204	42	** Reissue i original pate	ndependent ent	claims ove	r	1802	900	1802	900	Request for expedited examination	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent										of a design application			
						Other fee (specify)							
SUBTOTAL (2) (\$) 252						*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40							
**or number previously paid, if greater; For Reissues, see above								(6) 40					
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SUBMITTED BY			7	C	omplete (if applicable)			
Name (Print/Type)	Ryan W. Massey	Registration No. Attorney/Agent)	38,543	Telephone	248-641-1600			
Signature	Rya W.	Massey		Date	June 24, 2003			
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